

end of two weeks liquids only could be swallowed, and only with intense pain. The ulceration had then denuded the entire buccal face of the left tonsil and had extended to the outer two-thirds of the anterior palatine fold, which it threatened to destroy, thence invading the surface of the palate almost as far as the base of the uvula. Cauterization with pure creosote produced some sloughing, and perhaps some subsidence in the rapidity of the ulceration, which still increased, the pains continuing without abatement.

It was at this time that Dr. Westbrook was first consulted. The ulcerating area involved the anterior surface of the velum as far as the middle line, and to a point about a centimetre from the base of the uvula. Quite a large notch had been produced at the junction of the left border of the uvula with the free border of the velum. The outer half of the posterior surface of the velum and posterior palatine fold was included in the ulcerative process, which had reached downward as far as the pharyngo-epiglottic fold. The color of the mucous membrane was crimson rather than scarlet, and indicative of venous stasis. The left tonsil was much enlarged, and the submaxillary glands of the left side were enlarged. The urine was hyperacid and remained hyperacid throughout the twenty-four hours. There were several evidences of diffuse neuritis in the pupils, small bloodvessels, drum membrane, carotid pulsations, and in the gums. Under aseptic topical treatment, alkalization of urine as far as practicable, and anti-rheumatic treatment constitutionally, for details of all of which the original article must be referred to, the progress was steadily toward recovery, which became complete at the end of four weeks.

MORBID GROWTHS OF THE LARYNX.

DR. H. S. BIRKETT, of Montreal, reports (*New York Medical Journal*, 1894, No. 833) a case of subchordal spindle-elled sarcoma of the larynx successfully removed by thyrotomy, in a lady twenty-two years of age.

DR. CHARLES H. KNIGHT, of New York, reports (*idem.*, 1894, No. 835) three cases of laryngeal neoplasm. One of these is rather rare, a case of diffuse subglottic myxoma. After partial eradication through the mouth, tracheotomy was performed and radical extirpation practised through the wound. The other two were instances of papilloma. One was a case of multiple papilloma removed with forceps, with recurrence and removal in twelve months, and a second recurrence and removal five years later.

CARCINOMA OF THE LARYNX.

PROF. VIRCHOW, in an address before the Berlin Medical Society (*Berliner klin. Wochenschrift*, 1894, No. 31), demonstrated "preparations from two cases of carcinoma of the larynx cured by extirpation of the larynx." [It is hardly right to say that the carcinoma of the larynx was cured by the extirpation. It was bodily removed.]

In one instance the patient was cured of his carcinoma and died of pneumonia four and a half years later. This was one of Thiersch's cases operated on in 1880. No evidence of carcinoma was discoverable anywhere. The other case was one of Wolff's cases operated on in October, 1891, which died two and a half years later of metastases in the lung and in a bronchus. The preparations are minutely described, and one of them is illustrated.

DR. JULIUS WOLFF supplemented Virchow's remarks with a review of his own case, and then presented a general statement of cases that had lived considerable periods after the operation. Four were living respectively thirty-two months, three and a half years, four and one-third years, and four and a half years, without any signs of recurrence. Three had remained free from recurrence from four and a half to six years, and had then died of intercurrent diseases. Three had died from intercurrent diseases between twenty and twenty-two months after operation, and without recurrence. In one case of Thiersch's, and this the only one of its kind, there were, in addition to a local recurrence, metastases in other organs: cancerous lymphatic glands in the neck and in the mediastinum, and metastases the bulk of a walnut in the lungs.

OPERATIONS ON THE NASAL SEPTUM.

At the last meeting of the American Laryngological Association, DR. THOMAS R. FRENCH, of Brooklyn, read a timely paper, entitled "Observations on Some of the Results of Cutting Operations on the Nasal Septum," which gave rise to animated discussion (*New York Medical Journal*, 1894, No. 835). It had reference to perforations left by attempts to cut off the thickened portions of the deflected septum and the occurrence of adhesions between the septum and the turbinated bones. It was shown that such results were not always due to lack of skill on the one hand, and that the results were not as disastrous as might be supposed on the other. Nevertheless it was admitted that in many instances these results were due to lack of judgment in operating, lack of skill in operating, and lack of care after operating.

OBSTETRICS.

UNDER THE CHARGE OF

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RUPTURE OF THE UTERUS; ABDOMINAL SECTION; SUTURE AND DRAINAGE; RECOVERY.

PICCININI reports in *Il Policlinico*, 1894, No. 21, a case of rupture of the uterus happening at the Trastevere Maternity in Rome. The patient was a multipara who had borne two children after prolonged and difficult labors. The child was delivered by forceps, asphyxiated, but was revived. An